

MR-13-2887 11:56A FROM STAND UP MRI
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STAND-UP™ MRI OF MANHATTAN, P.C.

ADONNA PROSETA MD070443
DOB: 3/25/68
Exam Date: 3/10/07
Report Date: March 13, 2007

ALBERT VILLAFUERTE, MD
48 E. 43rd STREET
NEW YORK, NY 10017

MAGNETIC RESONANCE IMAGING SCAN OF THE CERVICAL SPINE

TECHNIQUE: Neutral Sitting: Sagittal T1, Sagittal T2, Gradient Echo Axial
INTERPRETATION: C2/3 and C4/5 posterior disc bulges are seen. At C3/4 there is a posterior disc herniation seen with ventral CSF impression. At T1/2 and T2/3 eccentric left-sided peritral disc herniations are noted. At left maxillary mucosal thickening is seen compatible with sinusitic change.

Examination otherwise demonstrates no significant protrusions into the neural canal, recesses or foramina. The cervical cord is otherwise unremarkable in signal and morphology. There is no evidence of syrinx or Chiari malformation. No focal prevertebral or posterior paraspinal abnormal masses or altered signals are otherwise noted.

IMPRESSION:
C2/3 AND C4/5 POSTERIOR DISC BULGES.
C3/4 POSTERIOR DISC HERNIATION WITH VENTRAL CSF IMPRESSION.
T1/2 AND T2/3 ECCENTRIC LEFT-SIDED PERIPHERAL DISC HERNIATIONS.
LEFT MAXILLARY MUCOSAL THICKENING COMPATIBLE WITH SINUSITIC CHANGE.

Thank you for referring your patient to us for evaluation.
Sincerely,

Robert Diamond

Robert Diamond, M.D.
Diplomate of the American Board of Radiology
RD/Dr

253 East 77th Street • New York, NY 10021 • Phone: 212-772-2300 • Fax: 212-772-2032

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EMERGENCY REPORT
3/13/07

MAR 19, 2007 3:15PM
NO. 1708 P. 3/7
Midtown Medical Practice, P.C.

48 E. 43rd Street, 6th Floor, New York, NY 10017 • Phone: (212) 682-3800 Fax: (212) 682-3179

ADONNA PROSETA MD070074
DOB: N/A
Exam Date: 3/12/07
Report Date: March 19, 2007

ALBERT VILLAFUERTE, MD

X-RAYS OF THE CERVICAL SPINE - 4 VIEWS

INTERPRETATION: Radiographic examination of the cervical vertebra reveals minimal flattening at the anterosuperior margin of the C6 vertebral body. No further osseous lesion or fracture is seen. The intervertebral disc spaces and posterior appendages appear intact.

IMPRESSION: MINIMAL FLATTENING AT THE ANTROSUPERIOR MARGIN OF THE C6 VERTEBRAL BODY.

X-RAYS OF THE LUMBAR SPINE - 2 VIEWS

INTERPRETATION: Radiographic examination of the lumbar vertebra reveals minimal dextrosciosis. No fracture or other osseous lesion is seen. The L5/S1 intervertebral disc space is narrowed with anterior productive changes. The posterior appendages and remaining intervertebral disc spaces appear intact.

IMPRESSION: MINIMAL DEXTROSCIOSIS.
L5/S1 INTERVERTEBRAL DISC SPACE NARROWING WITH ANTERIOR PRODOCTIVE CHANGES.

Thank you for referring your patient to us for evaluation.
Sincerely,

Allen Kail
Allen Kail, MD
AK/Dr

Allen Kail

MR-13-2807 11:56A FROM:STAND UP MRI

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P.2/2

**STAND-UP™ MRI OF MANHATTAN, P.C.**

ADONIA PROCEA M8070443

DOB: 3/25/68

Exam Date: 3/10/07

Report Date: March 13, 2007

ALBERT VILLAVUENTE, MD
48 E. 43RD STREET
NEW YORK, NY 10017

MAGNETIC RESONANCE IMAGING SCAN OF THE LUMBAR SPINE**TECHNIQUE:** Neutral Sitting: Sagittal T1, Sagittal T2, Axial T1, Axial T2

INTERPRETATION: L3/4 and L4/5 posterior disc bulges are seen. L5/S1 diminished disc space height, disc hydration loss and anterior disc extension and anterior spurting are present with adjacent osseous vertebral edema as well as posterior disc herniation.

Examination otherwise demonstrates the remaining lumbar vertebral bodies and intervertebral discs to be unremarkable in height and signal. The conus medullaris is unremarkable in signal, morphology and position. No focal prevertebral or posterior paraspinal abnormal masses or altered signals are otherwise noted.

IMPRESSION: L3/4 AND L4/5 POSTERIOR DISC BULGES.

L5/S1 DIMINISHED DISC SPACE HEIGHT, DISC HYDRATION LOSS AND ANTERIOR DISC EXTENSION AND ANTERIOR SPURTING WITH ADJACENT OSSEOUS VERTEBRAL EDEMA AS WELL AS POSTERIOR DISC HERNIATION.

Thank you for referring your patient to us for evaluation.
Sincerely,

Robert Diamond, M.D.
Diplomate of the American Board of Radiology
RD/Dcf

EFFICIENCY REPORT
ORIGINAL TO FOLLOW

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